

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

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NOV 27 2017

S.D. SEC. OF STATE

1. TITLE OF NEWSPAPER LYMAN COUNTY HERALD		2. DATE 9/21/2017
3. FREQUENCY OF ISSUE WEEKLY	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$ 40
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 223 N MAIN STREET, PRESNO SD 57568		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 223 N MAIN STREET, PRESNO SD 57568		
6. FULL NAME OF PUBLISHER: LUCY & KIM HALVERSON		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> FULL NAME K.L.H. LLC </div> <div style="width: 45%;"> COMPLETE MAILING ADDRESS PO BOX 518, PRESNO SD 57568 </div> </div>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1200	1200
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	68	70
2. Mail Subscription (Paid and or requested)	787	756
3. Paid Electronic Copies	17	20
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	872	846
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	6	6
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	20	20
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	898	872
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	150	168
2. Return from News Agents	152	160
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	1200	1200

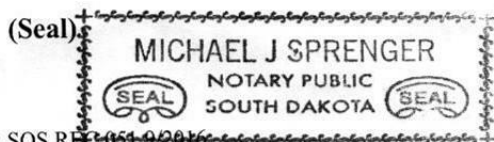
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
 I swear that the statements made by me are true, correct, and complete:

Lucy Hal
 (Signature)

Publisher
 (Title)

State of South Dakota)
 §
 County of *Lyman*)

Sworn to before me this *27* day of *Sept*, 20*17*
mw
 Notary Public



My commission expires: *MICHAEL J SPRENGER*
NOTARY PUBLIC - SOUTH DAKOTA
 My Commission Expires
March 27, 2022